(b) if so, whether remote and backward areas in Vidarbha region have been included in the list of 93 districts to improve malaria prevention, elimination of kala-azar and eradication of polio through effective prevention, diagnosis and treatment services; and

(c) whether periodic monitoring of this project would be done by Government?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI PANABAKA LAKSHMI): (a) Yes, Sir. For implementation of National Vector Borne Disease Control Programme a sum of US $ 250 million and US $ 271 million for polio Eradication has been approved by World Bank.

(b) Yes, Sir. Out of five malaria prone districts from Maharashtra, two districts namely Chandrapur & Gadchiroli are from Vidarbha region included in the list of 93 districts for malaria prevention & control under World Bank support project. The project shall be operationalized in two phases. First phase will cover 50 most malaria endemic districts in Andhra Pradesh, Chhattisgarh, Madhya Pradesh, Jharkhand & Orissa. The remaining 43 districts shall be covered from 2nd phase. All the five districts from Maharashtra have been included during the second phase of project implementation.

(c) Yes, Sir. The project activities shall be monitored by Government of India through Health Management Information System and field visits by the officers of Regional Offices of Health & Family Welfare and Directorate of National Vector Borne Disease Control Programme besides periodic review by experts.

Extension of services of faculty members at AIIMS

65. SHRI MAHENDRA MOHAN: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether some of the retiring faculty members have been granted extension at the AIIMS;

(b) if so, the details thereof and grounds on which they have granted extension along with period of extension;

(c) whether same is provided in the regulations;

(d) how many faculty members have retired since last two years; and

(e) whether it is legal to provide extension in service with the premise that retirement age is likely to be increased and if so, the details thereof?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI PANABAKA LAKSHMI): (a) to (e) The information is being collected and will be laid on the Table of the House.

Unsafe abortions

66. MS. MABEL REBELLO:
SHRI B. J. PANDA:
Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government is aware that highest number of unsafe abortions in the world are done in India;

(b) whether it is also a fact that a large number of maternal deaths are caused in the country on account of unsafe abortions;

(c) whether Government is also aware that unsafe abortions have various serious implications *i.e.* life-long disabilities and reproductive tract infection etc.;

(d) whether Government has formulated some stringent action plan to control this menace; and

(e) if so, the details thereof?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI PANABAKA LAKSHMI): (a) to (e) There is no recent officially published data which has been shared with the Government of India to corroborate the statement that the highest numbers of unsafe abortions in the world are carried out in India.

As per the last survey report of the Registrar General of India, Sample Registration System, titled "Maternal Mortality in India: 1997-2003 trends, causes and risk factors", published in the year 2006, 8% of the maternal deaths in the country are caused by abortions.

Unsafe abortions may have certain serious implications for women and lead to life long disabilities like the necessity of hysterectomy, conditions like vesicovaginal fistula, reproductive tract infections (RTIs), chronic pelvic inflammatory disease (PID), and infertility etc.

Under the National Rural Health Mission and the Reproductive and Child Health Programme Phase II within its umbrella, one of the key strategies to reduce the maternal mortality in the country is the provision of safe, affordable, accessible and acceptable abortion services to women in the public and private sector health facilities, as per the mandate of the Amended Medical Termination of Pregnancy (MTP) 2002 and MTP Rules and Regulations 2003.

Protection of migrants from HIV infection

67. MS. MABEL REBELLO:
SHRI B. J. PANDA:

Will the Minister of HEALTH AND FAMILY WELFARE be pleased state:

(a) whether it is proposed to map out high-risk migration corridors in the country to create safe working environment to protect migrants and their families from getting infected with HIV;

(b) if so, the details thereof;

(c) whether it is a fact that abysmal health infrastructure in the backward States is making the treatment and care difficult; and

(d) if so, what is the action plan of Government to develop better health infrastructure in Orissa, Jharkhand and other backward States to control this menace?